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Application Number	10/687,848
Filing Date	10/17/2003
First Named Inventor	Ginn, Richard S.
Art Unit	3731
Examiner Name	Dawson, Glenn K.
Attorney Docket Number	937.04

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR ✓ I hereby appoint	the practitioners associate	ed with the	e Cust	omer Ni	umber			8685
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Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature / / / / / / / / / / / / / / / / / / /								
Name Thomas Pale	mol							
Date October 12, 2	(400)743-7010							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
	forms are submitted.							to file (and by the LSD=0

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STATEMENT UNDER 37 CFR 3.73(b)					
Applicant/Patent Owner: Ensure Medical, Inc.					
Application No./Patent No./Control No.: 10/667 848	Filed/Issue Date: _:2/17/2003				
Entitled LOCATOR AND CLOSURE DEVICE AND METHOD OF US	SE .				
Ensure Medical Inc.	, a corporation				
(Name of Assignee) States that it is:	(Type of Assignee; corporation, partnership, university, government egency, etc.)				
1 the assignee of the entire right, title, and interest; or					
2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is	%)				
in the patent application/patent identified above by virtue of eith	er:				
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame or a true copy of the original assignment is attached.					
OR B. A chain of title from the inventor(s), of the patent applicati	or/patent identified above, to the current assignee as follows:				
From: Richard S. Ginn To: The document was recorded in the United States F	Ensure Medical, Inc.				
The document was recorded in the United States F Reel <u>015214</u> , Frame <u>0564</u>	Patent and Tracemark Office at				
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Additional documents in the chain of title are listed on a	supplemental sheet.				
As required by 37 CFR 3.73(b)(1)(l), the documentary evident assignee was, or concurrently is being, submitted for record [NOTE: A separate copy (i.e., a true copy of the criginal assignished in accordance with 37 CFR Part 3, to record the 302.08]	(atton pursuant to 37 CFR 3.11.				
The undersigned (whose title is supplied below) is authorized to a					
Signature	Gc:ober 12, 2306				
Thomas Palermo	Date				
Printed or Typed Name					
7	Telephone Number				
Vice President of Operations Title					

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